

Starmount Villa Residential Care Limited

# Starmount Villa Residential Care Home

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

Starmount Villa Residential Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided and both were looked at during this inspection. The home is large detached building, with extensive grounds, on the outskirts of Radcliffe. It can provide accommodation and personal care for up to 30 older people. At the time of our inspection there were 30 people living at the home. At the last inspection the service was rated Good. At this inspection we found the service remained Good.

Why the service is rated Good.

Staff members had been safely recruited. There were sufficient staff to meet people's needs. People were supported by staff who were trained and well supported in their job roles.

People and staff were protected from potential risk of harm as the service had identified and assessed any risks to them and reviewed these on a regular basis. Staff knew how to protect people from abuse.

People were supported with their health needs. A visiting health care professional told us the service worked very closely with them, and would make referrals promptly if needed and would always follow any advice given. Medicines were provided safely and when required. Staff received training and followed safe procedures for administering medicines.

People are supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice.

The home was very clean, well maintained, well decorated and comfortably furnished. People told us they enjoyed the food. We found meal times were social occasions and saw the food provided was plentiful and very well presented.

Everyone we spoke with spoke highly of the staff and the kind and caring nature of the support they received. Throughout our inspection we observed staff interactions that were relaxed, kind, compassionate, respectful and friendly. A visitor said, "My [relative] is here, which I am very pleased about. The staff and the management are superb, as is everything else. You just can't fault this place at all."

We found the provider to have a passionate commitment to people remaining part of a wider community and not becoming isolated in the home. The provider was continually developing meaningful and appropriate community links. There was a wide range of meaningful activities available to people both inside the home and in the local area. Visitors were encouraged and welcomed.

Enabling people to die with dignity and remembering those who had lived at the home was very important

at the home.

Care records were person centred and identified what was important to and for the person.

Feedback was obtained from people who used the service, their families, representatives and staff and this was used to improve the service. There was a procedure to help people to complain if they wanted to. People told us they had no complaints.

The home was well managed. The home had a registered manager as is required. We found the providers and registered manager were compassionate and committed to providing an individualised and caring service. All the staff we spoke with and observed during our inspection shared this commitment.

Systems were in place to monitor and continually improve the quality of the service provided. The provider had notified CQC of significant events and displayed the rating from the last report.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service remains Good.

### Is the service effective?

Good ●

The service remains Good.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Good ●

The service remains Good.

### Is the service well-led?

Good ●

The service remains Good.

# Starmount Villa Residential Care Home

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This was an unannounced comprehensive inspection which took place on the 14 December 2017. The inspection was undertaken by one adult social care inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service. This person had experience of services for older people and dementia care.

Before the inspection we asked the provider to complete a Provider Information return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and what improvements they plan to make. The provider had technical difficulties submitting the PIR before our inspection but provided us with a copy during our inspection. We reviewed the PIR and looked at information we held about the service and provider, including notifications the provider had sent us. A notification is information about important events which the provider is required to send us by law. We used this information to help us plan the inspection. We also asked the local authority and Healthwatch Bury for their views on the service. They raised no concerns.

As some people living at Starmount Villa Residential Home were not able to tell us about their experiences, we used the Short Observational Framework for Inspection (SOFI). SOFI is a specific way of observing care to help us understand the experience of people who could not talk to us.

During our inspection we spoke with eight people who used the service, four visitors, the registered manager, the assistant manager, two care workers, the cook, the activity coordinator, the two providers and a visiting Healthcare professional.

We carried out observations in public areas of the service. We looked at three care records, a range of records relating to how the service was managed including medication records, three staff personnel files, staff training records, duty rotas, policies and procedures and quality assurance audits.

# Is the service safe?

## Our findings

At our previous inspection we found that the service was safe. At this inspection we had no concerns about people's safety and the service continued to be good in this area.

We looked to see if arrangements were in place for safeguarding people who used the service from abuse. People we spoke with who lived at Starmount Villa Residential Home told us they felt safe. We found procedures were in place to protect people from harm and staff received training in safeguarding people from abuse. Staff we spoke with knew how what to do if they suspected abuse and were confident any issues they raised would be dealt with promptly by the registered manager and providers of the service.

We found there was a safe system of staff recruitment in place. The provider completed pre-employment checks before they offered staff employment. These checks should help to ensure people are protected from the risk of unsuitable staff being employed. Everyone we spoke with during our inspection told us there were always sufficient staff to meet their support needs. One person who used the service said, "The staff are all very good ...you don't wait long for assistance." Staff rotas we examined showed that staffing levels were provided at consistent levels. During our inspection we observed that people received the support they needed promptly. We saw staff provide support in an relaxed and unhurried way.

Assessments were carried out to identify any risks to the person or the staff supporting them. These included environmental risks and any risks to people's health and well-being. We saw the risk assessments were detailed and guided staff on the action to take to mitigate the identified risks. We saw that risk assessments had been regularly reviewed and updated when people's needs changed.

Systems were in place to protect people in the event of an emergency. Health and safety checks had been carried out and there was a programme of regular maintenance to the building and any equipment used.

We looked to see if there were safe systems in place for managing people's medicines. We found that people received their medicines as prescribed and medicines were stored securely. We found medicines management policies and procedures were in place. Records showed that staff had been trained in the safe administration of medicines and had their competency to administer medicines regularly checked.

People we spoke with told us the home was always very clean. One visitor said, "My [relatives] room is great and the whole place is immaculate." We found the home to be very clean and in a good state of repair. We saw that the service had an infection control policy and procedures. These gave staff guidance on preventing, detecting and controlling the spread of infection. We saw that staff wore appropriate personal protective equipment (PPE) when carrying out personal care tasks. Records showed that staff had received training in infection prevention.

Records we looked at showed that accidents and incidents were recorded. The record included a description of the incident and any injury and action taken by staff or managers. We found that managers of the service kept a log of all accidents and incidents so that they could review the action taken and identify

any patterns or lessons that could be learned to prevent future occurrences.



## Is the service effective?

### Our findings

At our previous inspection we found the service was effective. At this inspection we had no concerns and the service continued to be good in this area.

One person told us, "I was born in [local area] so I haven't travelled very far. My [relative] lives locally and comes to see me every week. My [relative] agrees with me that I have made the right move as I don't have to cook, clean, make my bed, do the washing, you name it. They really are on top of everything here." Another person said, "I am absolutely fine here, the staff are very good and so helpful. It is like home from home here."

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS.) A review of records showed that consideration was given to people's mental capacity and whether they were able to consent to their care and support. People had been assessed in line with the MCA to determine whether they had capacity to make specific decisions and also whether a DoLS authorisation was required.

We saw that people who had capacity had signed their plans of care to agree to their care and support. Care records contained information to guide staff on how best to support people to enable them to make decisions and give their consent. All the people who used the service we spoke with told us staff always sought their consent before providing any care or support. Staff we spoke with were able to describe how they offered people choice and encouraged them to make decisions for themselves.

Records we reviewed and staff we spoke with showed that staff received the training and support they needed to carry out their roles effectively. All staff had attained at least a level 2 qualification in care. People told us they were supported by staff who were effective and knew what they were doing.

We found that people's nutritional needs were met. We saw that monitoring sheets were in place for the people at risk of malnutrition and were reviewed monthly and were up to date. Everyone we spoke with said the food was of a very high standard. The kitchen had received a food hygiene rating of 5 in January 2017. This meant that they used safe food hygiene and storage systems.

During our inspection we spoke with the cook. They had a good knowledge of people's likes and dislikes, allergies and any specific dietary needs such as special prepared food. We saw that food provided was freshly prepared. We saw that in the dining room there was a chiller cabinet. This contained snacks that people could help themselves to throughout the day. We saw it contained cheese and biscuits, cakes, and sandwiches. It also had snack for those on special diets and who needed food with additional calories. There was a drinks area where people or their visitors could access a water chiller or make a hot drink when they wanted. Tables were set up with place mats, coasters, condiments, and table decorations. The dining room, which had been added as an extension to the home, was spacious, well laid out and bright. There was a pleasant, relaxed atmosphere in the dining room.

We found the home to be well maintained, well decorated and comfortably furnished. There were different communal areas for people to spend time in. One had a television on all day, one a radio and one was a quiet lounge for those who didn't want any background noise. This allowed people the opportunity to choose where to spend their time. The home was spacious and allowed easy movement around for those with mobility difficulties. There was a variety of seating available so that people could sit in a chair that was suitable or comfortable for them. People's bedrooms had been personalised with their photographs, furniture and ornaments. One person had a large glass display cabinet in their room containing lots of their glass ornaments and collectables they had gathered throughout their life. They told us the staff were very careful with their belongings and said that the cleaner kept them polished.

People who lived at the home had access to healthcare services and received on going healthcare support. A visiting health care professional we spoke with told us the service worked very closely with them, and would make referrals promptly if needed and would always follow any advice given. People we spoke with told us that when people need to go to hospital staff always escorted them and stayed until family arrived.

## Is the service caring?

### Our findings

At our previous inspection we found the service was caring. At this inspection we had no concerns and the service continued to be good in this area.

Everyone we spoke with told us the staff were caring and kind. One person who used the service said, "They do everything so well, all the staff are very good, friendly, polite, and caring. You just feel like a member of the family here." Another person said, "They are all very good to me here and I feel I am really cared for by very good staff." A visitor said of the staff, "They are all so patient and so caring." A visiting health care professional told us, "It's friendly, they [staff] care."

Staff we spoke with said, "There is a really fantastic atmosphere", "I'm proud of the care we give" and "It's the best job in the world."

Everyone who used the service we spoke with was confident that the management and staff knew them well. During the inspection we observed that staff knew people very well. We saw that people were treated with respect and dignity. We saw people were well presented. We observed staff knocking on people's bedroom doors before entering and saw staff kneeling down so that they were communicating at eye level with those who were seated.

We found the provider and registered manager were compassionate and committed to providing and individualised caring service. We found all the staff we spoke with and observed during our inspection shared this commitment. Throughout our inspection we observed staff interactions that were relaxed, kind, compassionate, respectful and friendly.

Visitors we spoke with told us the staff at the home were very welcoming. One said that it was; "A pleasure to visit." One person who used the service told us, "I am still able to keep my own contact with friends and family." During our inspection we saw lots of people coming and going, staff were welcoming and clearly knew visitors well.

People who used the service told us that staff respected their choices. Care records were very person centred and included people's preferences and what was important to them. We saw one record that identified the person liked a particular local newspaper and that another stated the person; "Wears a watch and her handbag is important."

We saw that leaflets were available to people who used the service to inform them about a local advocacy service should they need someone independent to advise them.

We found that care records were stored securely. Policies and procedures we looked at showed the service placed importance on protecting people's confidential information.

## Is the service responsive?

### Our findings

People we spoke with told us they had access to a wide range of activities both in the home and in the local community.

One person who used the service said, "They can't seem to do enough for me and today they are doing a special buffet and party for my birthday." Another person said, "I think they do very well for us here. I haven't really seen my care plan but they are so good there is no need. I do occasionally join in with the activities... I am happy as things are and certainly not bored."

A visitor said, "My [relative] is here, which I am very pleased about. The staff and the management are superb, as is everything else. You just can't fault this place at all." Another visitor said, "All is first class here. My [relative] and I live ten minutes away. We have no complaints whatsoever. They lay on special events at the drop of a hat and everyone is easy to talk to."

We found the provider to have a passionate commitment to people remaining part of a wider community and not becoming isolated in the home. A number of the residents had previously lived in the local area and the provider told us they wanted people to remain part of their community. There were planned events that were open to the local community including a garden party, which had been held in the summer. We saw there had been a firework display to music in November; this had included a potato pie supper. The provider told us this had been attended by 300 people.

The provider told us the home had close links with the local church. A communion service was held each week and there were regular pastoral visits. The provider also told us about 'spare chair Sunday'. People from the local church community were able to visit the home and have Sunday lunch at the home.

We saw that a local primary school and a brownie troupe also visited. The school had been to perform a Christmas carol concert the week before our visit. The home also offered work experience placements to social care students at a local college. During our inspection we saw people who used the service chatting with one of the young people who was on a work placement. We could see that they enjoyed the interaction.

People who used the service told us they were very happy with the activities on offer at Starmount Villa Residential Home. One person told us the home was like a hotel. They said, "I get my hair and nails done every week and clean clothes every day. Amongst the things I have enjoyed have been the Barbecue, the Fireworks, and the choir singing carols last week."

There was a planned programme of activities and regular entertainers. We spoke with the activity coordinator. We found them to be enthusiastic and committed to ensuring people's individual interests were catered for and that people remained part of the wider community. There were regular events and trips out of the home. We saw that people had visited a local country park and recently people had had afternoon tea on a steam train. Every person who lived at Starmount Villa Residential Home had also been offered the

opportunity to go, in small groups, to the local garden centre to view the Christmas displays and have lunch. The provider told us most people had gone and feedback had been very positive.

We found that the provider valued the importance of food, not just for its nutritional value, but for how it could be used to bring people together and reduce people's social isolation. People who used the service told us there were regular afternoon tea parties. People would dress in their "Sunday best" clothes and cakes and sandwiches were served on tiered cake stands. People said they were, "delicious" and very social events. We saw that there were regular social events for people who lived at the home and their friends and families. A recent party night had been attended by 100 people including friends and family of people who lived at the home.

Everyone's birthday was celebrated with a party, and a birthday cake was ordered from a local patisserie shop. We saw that someone had recently celebrated their 100 birthday. Photographs we saw showed that there had been a party, which lots of friends and relatives had attended. The home had arranged for the person to receive a telegram from the Queen. The telegram had been mounted in a frame for the person. The pictures showed the person sitting next to a cardboard cut-out of the queen. We spoke with the person about this; they were clearly very pleased and proud. The person told us they had a "lovely day."

The home had Wi-Fi throughout which people could access; the provider told us some people who lived at the home used this to communicate with relatives and friends via email and social media. During our inspection the person told us how they had emailed a staff member to wish them happy Christmas.

The provider told us that enabling people to die with dignity and remembering those who had lived at the home was very important to them and the service. Care records we reviewed identified if the person had specific wishes about they wanted to be cared for at the end of their life. Staff had received training in end of life care. We were shown a sculpture of a tree in the garden. Each leaf had the name of a person who had lived at the home who had passed away. Each year there was a service of remembrance held at the tree. One visitor said, "I particularly like the special tree in the garden where they attach a silver leaf with the name of anyone who has died here." We also saw there were other memorial benches and sculptures in the grounds.

The registered manager showed us a waiting list of people who wanted to live at the home. They told us each person had been visited where they currently lived and provided with information about the home prior to going on the list. People's support needs were assessed before they went on the waiting list and again when a place became available. People were able to spend the day at Starmount Villa Residential Home before they decided to live there so that they could see what the home was like.

Care records we reviewed included detailed assessments and care plans. Records were individualised, contained a full life history and included peoples interests and hobbies. They were person centred and lots of detail about what was important to and for the person. People were active partners in the development of these records. Information about people was reviewed regularly and we saw changes were made if needed. The assessment process ensured people were suitably placed and that staff knew about people's needs, wishes and goals.

We saw there was a complaints procedure and we saw that a system was in place to log any complaints received. The provider had received no complaints. People who used the service told us they knew how to make a complaint, but everyone told us they had never had to. A visitor said, "I don't expect any problems as everything is just lovely."

# Is the service well-led?

## Our findings

At our previous inspection we found the service was well-led. At this inspection we had no concerns and the service continued to be good in this area.

People spoke very highly of the registered manager, the providers and all the staff. A visitor told us, "Everyone, from the management to the cleaners, is committed to achieving high quality and you can depend on them all."

The home had a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Everyone we spoke with told us that they found the management to be approachable and easy to talk to. The registered manager had been registered with CQC in November 2017. Whilst they were new in post one of the providers, who had been the registered manager and was still registered with CQC, was working alongside them to provide support and guidance and was going to deregister once the induction was completed.

The provider told us they had always wanted the home to feel like a hotel. They told us, "We wanted it to be a place our own parents would want to stay." We found the providers and registered manager had a strong commitment to providing good quality, caring, person centred care.

Everyone we spoke with was positive about the provider, the registered manager and the way the home was run. People told us the providers were always available and visited the home every day.

Staff said of the new registered manager, "She's always concerned for the staff" and "She is very good." They said of the providers, "You can always go to them", "They are great bosses, you couldn't get better, and they are very understanding of your personal circumstances."

Staff told us they enjoyed working at the home. They said, "I love working here" and "Its fab. It's like my second home, we work well, we work as a team."

We found there were good systems of weekly, monthly and annual quality assurance check and audits. We saw these were used to monitor the quality of the service provided and look for any improvements that could be made.

People who used the service and visitors we spoke with told us they had regular opportunities to comment on the service provided at the residents meetings, which were always well attended and with questionnaire that were sent out twice each year. One visitor we spoke with told us they were not looking for changes as; "there had not been any problems." Another visitor told us, "I always attend the residents' [and relatives]

meetings in the conservatory where there are often one hundred people, most of whom enjoy an afternoon tea with the meeting."

The provider had notified CQC of significant events and displayed the rating from the last report.